CANDIDATE'S ELECTION DAY EXPENDITURES

(to be filed by a candidate or his principal campaign committee)

This report is required to be filed by all candidates who are required to file campaign finance disclosure reports and if no election day expenditures were made. The report is due not later than 10 days after the primary election, and, again, not later than 10 days after the general election if the candidate participates in the general election. This form is used to report payments by the candidate or his political committee (1) for advertising that is broadcast or published on election day, (2) for the services of election day workers, and (3) to organizations for election day activities in support of the candidate. NOTE: This report is required in addition to all other required reports. Therefore, the expenditures reported on this report must be reported in subsequent "Candidate's Reports" for this election.

Hand deliver or mall to: CAMPAIGN FINA	NCE, 8401 United Plaza Rivel Suite 2	200 Baton Bourge I & Topin 704	70
1. Full Name and Address of Candidate DANIEL EDWARDS POST OFFICE BOX 874 AMITE LA 70422	2. Office Sought (Include tills of office as well at parish, city, town and/or election district) SHERIFF TANGIPAHOA PARISH	OFFICE USE ONLY Appendment \$ 30 8629 1003	3086
3. Namo and address of principal campaign committee (Applicable only if candidate has a principal campaig	n committee)	800	29
- 14° - 1500 - 1 - 2	Picase see attached sheets.		
4. Date of Primary Election _10/04/2003	8		
Date of General Election			
6. Total Expenditures by Calegory	1700 <u>1700 17</u> 0	232	
a. Talevision Advertising (Schadul	e A)	_	
b. Radio Advertising (Schedule A)		0.60	
c. Newspaper Advertising (Schedu	ile A)	D.00	
d. Services of Election Day Worke	rs (Schedule B)	4200.00	
 e. Payments to Organizations for to Day Activities/Services (Sched 	Election ule C)	0.00	- 0
For any category in which no election day expenditures be omitted from this report.	were made, write -o- next to the category in Item	6. Any achedules not required to be comple	oled may
B a. Name of Person Preparing Report		8 b. Daylime Telephone	
7. WE HEREBY CERTIFY that the Information contains	d in this mand and the altrached schodules is to u	Ploage ses attached	sheets.
information and before, and that no election day expendit reported by the Louisiana Campaign Finance Disclosure		d herein, and	
Dated 10/13/2003 .		100 CCT 2	- 1 - 1 - 1 - 1 - 1
Signature of Capaliban Chairperson (To be Chairperson only if report by principal comp	aign conmittee)	985-517-9090 Payeine Telephone Number	
Say Syrah Leature Miller	<u>. </u>	985-345-5506 F	<u>.</u>
ON INMURADI ENGRETIMAN		Dayline Telephone Number 4:	

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for the services of election day workers, a NOTE: This report is required in addition must be reported in subsequent 'Candidate's	to all other required reports. Therefore	y activities in support of the candidate. , the expenditures reported on this report
Hand deliver or mall to: CAMPAIGN FINAL	NCE, 8401 United Plaza Blvd., Suite 2	00, Baton Rouge, LA 70809-70179.
1. Full Name and Address of Candidate DANIEL EDWARDS POST OFFICE BOX 974 AMITE LA 70422	2. Office Sought (Include title of office as well as perish, city, town and/or election district) SHERIFF TANGIPAHOA PARISH	OFFICE USE ONLY Ede-p 10/5 88 67 29
Name and address of principal campaign committee (Applicable only if candidate has a principal campaign)		5CANNED OCT 1 4 2003
4. Date of Primary Election 10/04/2003	Please see attached chosts.	D
Date of General Election		DF: 17VF)
5. Total Expanditures by Category	760 ·	100
a. Television Advertising (Schedul	e A)	0.00
 B. Radio Advertising (Schedule A) 		0.00
c. Newspaper Advertising (Schedu	ule A)	0.00
 d. Services of Election Day Worke 	ers (Schedule B)	0.00
e. Payments to Organizations for I Day Activities/Services (Sched	Election ule C)	0.00
For any category in which no election day expenditures be contited from this report	were made, write -o- next to the catagory in Item	6. Any schedules not required to be completed may
6 a. Name of Person Preparing Report	190	6 b. Daytime Telephone
<u> </u>	3200	Please see attached sheets.
7. WE MEREBY CERTIFY that the information covalence information and belief, and that no election day expenditioned by the Louisiana Campaign Finance Disclosure Dated 10/04/2003 10/04/2003	tures have been made that have not been reporte	n and appear to the base of any beauty as
Signature of Candidata Chairperson (10 be Chairperson only if report by principal camp	e signed by reign committee)	965-517-9080 Dayanne raiapinoise number
Signature of Frequency Signature of Frequency 104 Rev. 369 Page Rev. 358		985-345-8606 Daytime Telephone Number

Affillated Person	ns / Organizations	2/8
Name and Address of SCOTT H. SLEDGE P. O. BOX 3045	Person Preparing Report	Candidate Information Office Spught (include title of office as well as perish, city, lower and/or election district)
HAMMOND	LA 70404	Name of Political Party:
Chairperson:		☐ SUPPORTED ☐ DPPOSED by the Committee
Daytimo Telephona (Pre	paren: 985-345-5507	Rul of Aft. Dru. to Contrar

Name and Address of Porson I SCOTT H. SLEDGE P. O. BOX 3045	Preparing Report	Candidate information Office South (include true of office as well as parish, city, town and/or staction district)	1
HAMMOND	LA 70404	745	,
		Name of Political Party:	
Chalmperaon:	- CLOS	☐ SUPPORTED ☐ OPPOSED by the Committee	
Daytime Telephone (Preparer):	985-345-5507	Rel of Alf. Org. to Comm:	7.C

The following Information must be provided for each individual to whom an expenditure was made for services performed on election day. Also, the information must be provided for each individual performing services on election day to whom a monetary expenditure was made by an organization to which a payment was made by the candidate completing this report. Such an organization is required by law to furnish this information to the candidate completing this report.

1. Name and Address of Recipi	lerit	0	2. Social Security Number	3. Amount Pald	Organization Making Payment (if applicable)
SHONITA BRIDGES 408 CRYSTAL HAMMOND	LA.	70401	435-41-7363	100.00	
CHEWWAPAWA BRIGGS		- 14 SU (-		100.00	
ELNORA BROWN P. O. BOX 2314 HAMMOND	LA	70404	438-94-2681	100.00	
APRIL BRUMFIELD P. O. BOX 891	LA	70422	439-45-1250	100.00	
DEANNA BURTON	807	\$25,555 5,755 5,755 1,75		100.00	
KATE CARTER 103 RUTH DRIVE HAMMOND	LA	70401	434-23-9383	100.00	
TONIA CONLEY 290 PRES. HOOVER ST. PONICHATOULA	LA	70454	434-25-0510	100.00	
CAROLYN CYPRIAN 1900 S. NATCHEZ ST.		- VI	436-88-8294	100.00	70 EC 140 Y
HAMMOND	LA	70403			

AMENDMENT

ent		2. Social Security Number	5. Amount Peld	Organization Making Payment (if applicable)
IA.	70443	201-48-2621	100.00	
LA	70401	437-98-1575	100,00	
LA	70444	437-23-2915	100.00	61.03 m/z
LA	70443	435-19-2164	100.60	
LA	70443	800-50-8461	100.00	
LA	70401	439-31-9804	ୀ00.00	<u> </u>
Javana	anere:		190.00	AT STATE
		434-31-8662	100.90	hinomes
	LA LA	LA 70443 LA 70443	LA 70443 LA 70444 LA 70444 LA 70443 B00-50-8461 LA 70443 LA 70401	LA 70443 437-98-1675 100.00 LA 70444 435-19-2164 100.00 LA 70443 800-50-8461 100.00 LA 70443 439-31-8604 100.00

The following information must be provided for each individual to whom an expenditure was made for services performed on election day. Also, the information must be provided for each individual performing services on election day to whom a monetary expenditure was made by an organization to which a payment was made by the candidate completing this report. Such an organization is required by law to furnish this information to the candidate completing this report.

1. Name and Address of Recipient		2. Social Security Number	3. Amount Paid	4. Organization Making Payment (if applicable)	
WANDA JACKSON 103 PINE DR. HAMMOND	LA	70401	437-37-7158	100.0d	
YOLANDO JACKSON 1413 MOONEY AVE.	700		434-25-2881	\$00.00	
HAMMOND	LA	70401			
ELDORA JOHNSON 134 DÜRT ST.	100	treerie ten	435-04-8774	100.00	
PONCHATQUILA	LA	70454			
DEIDRA LEONARD 701 W. PALMETTO ST.	W67/E	to coore	437-43-6149	100.00	
АМПЕ	LA	70422			
SHARONDA MARTIN 2298 LEÓNÓRO CHAPEL RO		20	438-55-0301	100.00	22. 22.
INDEPENDENCE	LA	70443			
LINDA MARYLAND P. O. BOX 1177		387	436-11-4084	100.00	1000000
INDEPENDENCE	LA	70443			
LAURICE MATTHEWS		9X2-9		100.00	
					á
MARGARET MORRIS				100.00	

AMENDMENT

1. Name and Address of Recipient		2. Social Security Number	3. Amount Pald	4. Organization Making Payment (if applicable)	
TIFFANY MORRIS	-			100.00	
CAROLYN MOSELY P. O. BOX 431		Wille	434-17-5592	100.00	
PONCHATOULA	LA	70454			
JENNIFER PERRY 304 LAWSON LANE	3		439-69-5585	100.00	(Cort 00)
AMITE	LA	70422			
BHEMEKA PERRY 130 S. PINE ST.			434-35-4588	100.00	-
INDEPENDENCE	LA	70443			
IRMA PITTMAN 1203 MLK , APT. 74			437-92-9968	100.00	1-11-11
HAMMOND	LA	7 04 01			
LENORA R. DOROUEN	Ale Se			100.00	
KENYETTA RICHARDSON 508 SOUTH ST.	8	2 <u>-10-388</u>	493-51-2599	100.00	
AMITE	Ь	70422			
LINDA RICHARDSON 10300 RICHARDSON RD			439-98-3055	100.00	APPNO.
INDEPENDENCE	Ц	70443			
Corns 104, Ray, Parce Ray, 3/88.	200		Į.	1 .	ATRICA DE ME

Name and Address of Recipi	lent		2. Social Security Number	3. Amount Paid	Organization Making Paymont (if applicable)
SHARETTA RICHAROSON SDS SOUTH STREET AMITE	LA	70422	435-31-6595	100.00	
DANIELLE SIEBER P. O. BOX 1528	*	-	435-55-3308	100.00	
INDEPENDENCE	LA	70443			
GWEN SMITH 14234 LINDSEY DR	10000	20112420	436-04-7841	100.00	
HAMMOND	LA	70401			
ORA BMITH 53381 CROGSOVER ROAD	-2		439-02-3434	100.00	1548 - 2020
INDEPENDENCE	LA	70443	1		
ERIN TAYLOR			3	1DD.00	
SHARON THOMPSON P. O. BOX 108			438-27-1700	100.00	
АМПЕ	LA	70422			
ANTOINETTE TICKLES P. D. BOX 1321		98	434-21-2535	100.00	AND SEC. US
PONCHATOULA	LA	70454			
WANDA TILLIS 1410 SUN LANE		-	427-33-4272	100.00	
HAMMOND	LA	70401		3	

***			Organization Making Payment (if applicable)
LOTISSA WATSON		100.00	
ANNUAL	439-06-D513	100.00	
LA 70401			1
		2004-07/78-07/8 2007 1-07/94	\$200 \$400000